

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**☒

Declaration Submitted with Initial Filing

☐

Declaration Submitted after Initial Filing

Attorney Docket Number

X-14075

First Named Inventor

Michael Philip Cohen

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole Inventor (if only one name is listed below) or an original, first and joint Inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PYRIDINOYLPIPERIDINES AS 5-HT_{1F} AGONISTS

the specification of which

☐ is attached hereto

OR

☒ was filed on
(MM/DD/YYYY)

03/27/2003

as United States Application Number or PCT International

Application
Number

PCT/US03/08455

and was amended on
(MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

60/369,088

03/29/2002

☐ Additional provisional application
numbers are listed on a supplemental
priority sheet attached hereto.

**DECLARATION**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or § 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Attorney Name	Reg. No.
Arvie J. Anderson	45,263
Lynn D. Apelgren	45,341
Robert A. Armitage	27,417
Brian P. Barrett	39,597
Michael T. Bates	34,121
Roger S. Benjamin	27,025
Gary M. Birch	48,881
William R. Boudreaux	35,796
Steven P. Caltrider	36,467
Paul R. Cantrell	36,470
John Cleveland	50,697
Charles E. Cohen	34,565
Donald L. Corneglio	30,741
Gregory A. Cox	47,504
Paula K. Davis	47,517
John C. Demeter	30,167
Manisha A. Desai	43,585
Paul J. Gaylo	36,808
Francis O. Glnah	44,712
Janet A. Gongola	48,436
Amy E. Hamilton	33,894
Danica Hostettler	51,820
Thomas E. Jackson	33,084
Soonhee Jang	44,802
Gerald P. Keleher	43,707
James J. Kelley	41,888
Paul J. Kolvuniemi	31,533

Attorney Name	Reg. No.
Thomas LaGrandeur	51,026
Robert E. Lee	27,919
Kirby Lee	47,744
James P. Leeds	35,241
Nelsen L. Lentz	38,537
Elizabeth A. McGraw	44,646
Douglas K. Norman	33,267
Arleen Palmberg	40,422
Thomas G. Plant	35,784
Edward Prein	37,212
Grant E. Reed	41,284
James J. Sales	33,773
Michael J. Sayles	32,295
David M. Stermerick	40,187
Mark J. Stewart	43,936
Robert D. Titus	40,206
Robert C. Tucker	45,165
Tina M. Tucker	47,145
MaChari Vomdran-Jones	38,711
Gilbert T. Voy	43,972
Thomas D. Webster	39,872
Lawrence T. Welch	29,487
Alexander Wilson	45,782
Mark A. Winter	53,782
MaryAnn Wiskerchen	45,511
Dan L. Wood	48,613

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	ELI LILLY AND COMPANY				
Address	ATTN: R. Craig Tucker				
Address	Patent Division, P.O. Box 6288				
City	INDIANAPOLIS	State	INDIANA	ZIP	46206-6288
Country	Telephone		(317) 433-9829	Fax	(317) 276-3861

I hereby declare that all statements made herein, of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A Petition has been filed for this unsigned inventor

Given Name	Michael	Middle Name	Phillip	Family Name	Cohen	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	8141 Bowline Court						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46236	Country	US

☒ Additional Inventors are being named on supplement sheet(s) attached hereto.



DECLARATION

Name of Additional Joint Inventor, if any: <i>200</i>				<input type="checkbox"/> A Petition has been filed for this unsigned Inventor			
Given Name	<i>Daniel</i>	Middle Name	<i>Timothy</i>	Family Name	<i>Kohlman</i>	Suffix e.g. Jr.	
Inventor's Signature	<i>[Signature]</i>					Date	
Residence: City	<i>Camby</i>	State	<i>IN</i>	Country	<i>US</i>	Citizenship	<i>US</i>
Address	<i>6281 East Old Otto Court</i>						
Post Office Address	<i>SAME AS ABOVE</i>						
City	<i>Camby</i>	State	<i>IN</i>	Zip	<i>46113</i>	Country	<i>US</i>

Name of Additional Joint Inventor, if any: <i>300</i>				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	<i>Sidney</i>	Middle Name	<i>Xi</i>	Family Name	<i>Liang</i>	Suffix e.g. Jr.	
Inventor's Signature	<i>[Signature]</i>					Date	
Residence: City	<i>Bethany</i>	State	<i>CT</i>	Country	<i>US</i>	Citizenship	<i>US</i>
Address	<i>79 Carriage Drive</i>						
Post Office Address	<i>SAME AS ABOVE</i>						
City	<i>Bethany</i>	State	<i>CT</i>	Zip	<i>06524</i>	Country	<i>US</i>

Name of Additional Joint Inventor, if any: <i>400</i>				<input type="checkbox"/> A Petition has been filed for this unsigned Inventor			
Given Name	<i>Vincent</i>	Middle Name		Family Name	<i>Mancuso</i>	Suffix e.g. Jr.	
Inventor's Signature	<i>[Signature]</i>					Date	<i>15 - APRIL - 2003</i>
Residence: City	<i>5651 Thy-le-Chateau</i>	State		Country	<i>BE</i>	Citizenship	<i>BE</i>
Address	<i>27 rue des Hauts-Prés</i>						
Post Office Address	<i>SAME AS ABOVE</i>						
City	<i>5651 Thy-le-Chateau</i>	State		Zip		Country	<i>BE</i>

Name of Additional Joint Inventor, if any: <i>500</i>				<input type="checkbox"/> A Petition has been filed for this unsigned Inventor			
Given Name	<i>Yao-Chang</i>	Middle Name		Family Name	<i>Xu</i>	Suffix e.g. Jr.	
Inventor's Signature	<i>[Signature]</i>					Date	
Residence: City	<i>Fishers</i>	State	<i>IN</i>	Country	<i>US</i>	Citizenship	<i>CA</i>
Address	<i>10815 Timber Springs Drive East</i>						
Post Office Address	<i>SAME AS ABOVE</i>						
City	<i>Fishers</i>	State	<i>IN</i>	Zip	<i>46038</i>	Country	<i>US</i>



DECLARATION

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Bai-Ping	Middle Name		Family Name	Ying	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Fishers	State	IN	Country	US	Citizenship	US
Address	7717 Hidden Ridge						
Post Office Address	SAME AS ABOVE						
City	Fishers	State	IN	Zip	46038	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	DeAnna	Middle Name	Piatt	Family Name	Zacherl	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Noblesville	State	IN	Country	US	Citizenship	US
Address	8555 Providence Drive						
Post Office Address	SAME AS ABOVE						
City	Noblesville	State	IN	Zip	46060	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Deyi	Middle Name		Family Name	Zhang	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Carmel	State	IN	Country	US	Citizenship	CN
Address	1372 Kirklees Drive						
Post Office Address	SAME AS ABOVE						
City	Carmel	State	IN	Zip	46032	Country	US

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor					
Given Name	Frantz	Middle Name		Family Name	Victor	Suffix e.g. Jr.	
Inventor's Signature	IN				Date		
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	4855 North Tuxedo Street						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46205	Country	US

Please type a plus sign (+) inside this box ☐Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**DECLARATION FOR
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PATENT APPLICATION**

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				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Application Number(s)

Filing Date (MM/DD/YYYY)

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03/29/2002

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Brian P. Barrett	39,597
Michael T. Bates	34,121
Roger S. Benjamin	27,025
Gary M. Birch	48,881
William R. Boudreaux	35,796
Steven P. Caltrider	36,467
Paul R. Cantrell	36,470
John Cleveland	50,697
Charles E. Cohen	34,565
Donald L. Corneglio	30,741
Gregory A. Cox	47,504
Paula K. Davis	47,517
John C. Demeter	30,167
Manisha A. Desai	43,585
Paul J. Gaylo	36,808
Francis O. Ginah	44,712
Janet A. Gongola	48,436
Amy E. Hamilton	33,894
Danica Hostettler	51,820
Thomas E. Jackson	33,064
Soonhee Jang	44,802
Gerald P. Keleher	43,707
James J. Kelley	41,888
Paul J. Koivunemi	31,533

Attorney Name	Reg. No.
Thomas LaGrandeur	51,026
Robert E. Lee	27,919
Kirby Lee	47,744
James P. Leeds	35,241
Nelsen L. Lentz	38,537
Elizabeth A. McGraw	44,646
Douglas K. Norman	33,267
Arlene Palmberg	40,422
Thomas G. Plant	35,784
Edward Prein	37,212
Grant E. Reed	41,264
James J. Sales	33,773
Michael J. Sayles	32,295
David M. Stemerick	40,187
Mark J. Stewart	43,936
Robert D. Titus	40,206
Robert C. Tucker	45,165
Tina M. Tucker	47,145
MaCharri Vomdran-Jones	36,711
Gilbert T. Voy	43,972
Thomas D. Webster	39,872
Lawrence T. Welch	29,487
Alexander Wilson	45,782
Mark A. Winter	53,782
MaryAnn Wiskerchen	45,511
Dan L. Wood	48,613

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name **ELI LILLY AND COMPANY**

Address **ATTN: R. Craig Tucker**

Address **Patent Division, P.O. Box 6288**

City **INDIANAPOLIS**

State **INDIANA**

ZIP **46206-6288**

Country Telephone **(317) 433-9829** Fax **(317) 276-3861**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A Petition has been filed for this unsigned inventor

Given Name **Michael**

Middle Name **Philip**

Family Name **Cohen**

Suffix
e.g. Jr.

Inventor's Signature

Date

Residence: City **Indianapolis**

State **IN**

Country **US**

Citizenship **US**

Address **8141 Bowline Court**

Post Office Address **SAME AS ABOVE**

City **Indianapolis**

State **IN**

Zip **46236**

Country **US**

☒ Additional Inventors are being named on supplement sheet(s) attached hereto.

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**DECLARATION**

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Daniel		Middle Name	Timothy	Family Name	Kohlman	Suffix e.g. Jr.
Inventor's Signature						Date	
Residence: City	Camby	State	IN	Country	US	Citizenship	US
Address	6281 East Old Otto Court						
Post Office Address	SAME AS ABOVE						
City	Camby	State	IN	Zip	46113	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Sidney		Middle Name	Xi	Family Name	Liang	Suffix e.g. Jr.
Inventor's Signature						Date	4/21/2003
Residence: City	Bethany	State	CT	Country	US	Citizenship	US
Address	79 Carriage Drive						
Post Office Address	SAME AS ABOVE						
City	Bethany	State	CT	Zip	06524	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Vincent		Middle Name		Family Name	Mancuso	Suffix e.g. Jr.
Inventor's Signature						Date	
Residence: City	5651 Thy-le-Chateau	State		Country	BE	Citizenship	BE
Address	27 rue des Hauts-Pres						
Post Office Address	SAME AS ABOVE						
City	5651 Thy-le-Chateau	State		Zip		Country	BE

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Yao-Chang		Middle Name		Family Name	Xu	Suffix e.g. Jr.
Inventor's Signature						Date	
Residence: City	Fishers	State	IN	Country	US	Citizenship	CA
Address	10815 Timber Springs Drive East						
Post Office Address	SAME AS ABOVE						
City	Fishers	State	IN	Zip	46038	Country	US

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Bai-Ping	Middle Name		Family Name	Ying	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Fishers	State	IN	Country	US	Citizenship	US
Address	7717 Hidden Ridge						
Post Office Address	SAME AS ABOVE						
City	Fishers	State	IN	Zip	46038	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	DeAnna	Middle Name	Piatt	Family Name	Zacherl	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Noblesville	State	IN	Country	US	Citizenship	US
Address	8555 Providence Drive						
Post Office Address	SAME AS ABOVE						
City	Noblesville	State	IN	Zip	46060	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Deyi	Middle Name		Family Name	Zhang	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Carmel	State	IN	Country	US	Citizenship	CN
Address	1372 Kirklees Drive						
Post Office Address	SAME AS ABOVE						
City	Carmel	State	IN	Zip	46032	Country	US

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor					
Given Name	Frantz			Middle Name		Family Name	Victor	Suffix e.g. Jr.	
Inventor's Signature							Date		
Residence: City	Indianapolis			State	IN	Country	US	Citizenship	US
Address	4855 North Tuxedo Street								
Post Office Address	SAME AS ABOVE								
City	Indianapolis			State	IN	Zip	46205	Country	US

Rec'd PCT/PTO 28 SEP 2004

PTO/SB/80 (12-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:

☒ Practitioners associated with the Customer Number:

25885

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Assignee Name and Address:

Eli Lilly and Company
Patent Division
PO Box 6288
Indianapolis, Indiana 46206-6288

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Douglas K. Norman		
Signature	<i>Douglas K. Norman</i>	Date	10 August 2004
Title	Deputy General Counsel, General Patent Counsel	Telephone	317-433-1651

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.